

**ISSUE SLIP STAPLE AREA (for additional cross references)**

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	9th		9/20/01
O.I.P.E. CLASSIFIER	8		9-26-00
FORMALITY REVIEW	BE	897	10-26-01
RESPONSE FORMALITY REVIEW	1/H	600105	3-8-01

## **INDEX OF CLAIMS**

✓ .....	Rejected	N .....	Non-elected
= .....	Allowed	I .....	Interference
- (Through numeral) ...	Canceled	A .....	Appeal
÷ .....	Restricted	O .....	Objected

Claim	Original	Date
Final	1	11-10-64
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If more than 150 claims or 10 actions  
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